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| AMENDMENT TRANSMITTAL LETTER | | | Docket No. 46162-00008USPX | | |
| Application No. 10/813246 | Filing Date March 30, 2004 | Examiner M. J. Consilvio | Art Unit 2872 | | |
| Applicant(s): Yaoming Zhang | | | | | |
| Invention: DIRECTED REFLECTION LIGHT COLLECTING DEVICE WITH PLANAR REFLECTORS | | | | | |
| TO THE COMMISSIONER FOR PATENTS | | | | | |
| Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below. | | | | | |
| CLAIMS AS AMENDED | | | | | |
| | Claims Remaining After Amendment | Highest Number Previously Paid | Number Extra Claims Present | Rate | |
| Total Claims | 10 | - 28 = | | x | |
| Independent Claims | 1 | - 3 = | | x | |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | |
| Other fee (please specify): | | | | | |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: | | | | | 0.00 |
| <input type="checkbox"/> Large Entity <input checked="" type="checkbox"/> Small Entity | | | | | |
| <input checked="" type="checkbox"/> No additional fee is required for this amendment. | | | | | |
| <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed. | | | | | |
| <input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed. | | | | | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | | | | | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>10-0447</u> as described below. (46162-00008USPX-D.Nguyen) | | | | | |
| <input checked="" type="checkbox"/> Credit any overpayment. | | | | | |
| <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17. | | | | | |
| /Daniel G. Nguyen/ Daniel G. Nguyen Attorney/Agent Reg. No.: 42,933 | | | Dated: <u>November 22, 2006</u> | | |
| JENKENS & GILCHRIST, A PROFESSIONAL CORPORATION 5 Houston Center 1401 McKinney, Suite 2600 Houston, Texas 77010 (713) 951-3354 | | | | | |